HEALTH PLAN EFFORTS TO MANAGE SPECIALTY DRUG SPENDING WHILE ENSURING ACCESS TO HIGH-QUALITY CARE

Health plans have developed a number of strategies in response to sustained cost increases that ensure access to critically important drugs while also holding down costs. These approaches include providing patients with tools and support to help them successfully manage their specialty medications, promoting collaborative arrangements with physicians and pharmacists, and focusing on the supply side through the use of specialty pharmacies.
Condition-Specific Support Teams & Personalized Care

Aetna’s approach to managing specialty drugs relies on condition-specific support teams and personalized care from pharmacists. Support programs are in place for multiple sclerosis, hepatitis C, HIV, rheumatoid arthritis, and autoimmune diseases. Disease progression is closely monitored by nurse-led teams of clinicians and the care management component of the support program focuses on the highest-risk patients by emphasizing the importance of medication adherence. Patients first join the care management support program when they are prescribed or have a change in medication related to one of the aforementioned conditions, since both circumstances place patients at a higher risk of being noncompliant. These high risk patients, accounting for some 15-20% of the patients taking specialty medications, receive enhanced support for at least the first 90 days after receiving a new or changed prescription, which includes monthly calls from nurses – more frequently if needed – and direct access to a team of nurses for additional support. The nurse care managers also provide assessments based on disease state, discuss any concerns regarding activities of daily living, monitor and improve compliance, address any side effects, and make any necessary referrals. The need for this enhanced level of support is then re-evaluated and either extended or the patient is transitioned to a less intensive schedule of support.

All patients taking specialty medications receive personalized care from the pharmacists, information on copayment assistance programs, coordination with behavioral health teams, referrals to dieticians, and information on community-based support programs. On a monthly basis, the Specialty Pharmacy management team serves about 30,000 patients receiving specialty medications for chronic conditions and about 10,000 patients receiving specialty medications for acute conditions.

Transplant- & Oncology-Specific Initiatives

In addition, Aetna has a national Medical Excellence Program, consisting of hospitals that have met extensive quality and cost-effectiveness criteria, that includes specialty drugs for patients in need of solid organ and bone marrow transplants. Aetna also has a separate oncology-specific initiative that includes specialty oncology drugs and encourages treatment consistent with accepted guidelines, or clinical pathways, through close collaboration with oncology provider groups.

Integration with Aetna Total View

Aetna’s programs include core services through the medical benefit as well as additional services through the pharmacy benefit, enabling the plan to coordinate with the behavioral health team, case managers, disease managers, and discharge planning teams for high-risk patients with chronic diseases taking specialty medications. Aetna’s Total View clinical desktop system brings together all the clinical information on a patient and enables the plan and clinicians to look at a patient’s total care to ensure coordination and integration of services. For example, a transplant patient will go through Aetna’s Medical Excellence Program for case management and discharge planning and have their specialty medications overseen by Aetna’s Specialty Pharmacy management team – all the while promoting collaboration and coordination among the teams to streamline communication with the patients.

Looking Forward

Aetna is continuing to explore opportunities for outcomes-based contracting in the area of specialty pharmacy, looking at key metrics such as increased medication adherence, reduced hospitalizations, and reduced total cost of care.
Model Based on Increased Physician Interaction for Specialty Drugs

The AmeriHealth Caritas Family of Companies’ approach is based on increased interactions between physicians, patients, health plans, and the enterprise’s specialty drug PBM, PerformSpecialty. AmeriHealth Caritas’ “touch point” model is centered on partnerships with physicians and patients to improve care coordination, provide patient education, reduce adverse drug events, and improve medication adherence. Working in collaboration with physicians, AmeriHealth Caritas provides care management services for patients prescribed a specialty medication for a condition such as hepatitis C or multiple sclerosis. Care managers engage patients to assess barriers to adherence related to polypharmacy and adverse side effects; provide up-to-date information to the prescribing physician’s office about their patients and their conditions; and equip physicians with actionable information to better manage the complete care of their patients.

Specialty Pharmacy Management Tailored to Condition and Specialty Medication

AmeriHealth Caritas’ approach to specialty pharmacy management varies by class of drug, as every disease is different and requires a unique approach to patient care. AmeriHealth Caritas has developed patient programs for conditions such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and Respiratory Syncytial Virus (RSV), based on evidence-based clinical protocols and disease management processes to ensure accurate and appropriate storage, handling, dosages, and quantities of specialty medications. AmeriHealth Caritas’ pharmacists have expertise in managing chronic conditions that require specialty drugs, an expertise that many retail pharmacists may not have, which enables them to deliver comprehensive, patient-centered services from medication dispensing to follow-up member engagement and care management. Patient support programs are customized to specific clinical conditions, with emphasis on medication adherence, strategies to reduce adverse effects, while addressing physical, behavioral, and social barriers to care.

Using Technology to Improve Patient Adherence

AmeriHealth Caritas is committed to engaging patients to improve medication adherence and has implemented a multitude of strategies designed to help patients comply with their medication regimens. Building off its successful drug therapy management program for individuals with chronic diseases such as diabetes, AmeriHealth Caritas has deployed innovative solutions to promote adherence and improve health outcomes. AmeriHealth Caritas puts tablet computers in the hands of newly diagnosed hepatitis C patients on triple therapy to provide in-home monitoring whereby members complete a daily health assessment such as when they take their medications and what side effect they are experiencing. The patient-reported information is electronically transmitted to AmeriHealth Caritas for review and to proactively address potential problems. Patients are also able to receive medication reminders on the tablets, with the eventual goal of enabling patients to login and receive this information on their smartphones.

Integration of a Specialty Pharmacy for Specialty Drug Distribution

AmeriHealth Caritas currently works with a pharmacy benefits manager to manage the drug component of its plans. Recognizing the unique challenges associated with specialty medications, AmeriHealth Caritas is in the process of transitioning all of its specialty drug distribution to its specialty pharmacy, PerformSpecialty.

Looking Forward

AmeriHealth Caritas has seen positive results of its drug therapy management program for patients with diabetes taking multiple medications, including a 10% decrease in the rate of inpatient admissions compared with a 66% increase for non-participants. By working with PerformSpecialty on the distribution and management of specialty medications, and leveraging increased interaction and advancements in technology, AmeriHealth Caritas anticipates similar outcomes for patients taking other specialty drugs.
Medication Adherence and Care Coordination
Keys to Successful Management of Specialty Drugs

Anticipating that eight out of every ten drugs will be specialty drugs by 2017, CareFirst is working to build a pharmacy program that focuses on care coordination and gives patients the support they need to stay adherent to their medications. Medication adherence is a win-win for everyone involved as it improves patient outcomes and lowers total cost of care. For example, one missed pill to treat hepatitis C costs $1,000, prolongs treatment, and drives up costs overall. CareFirst’s specialty pharmacy coordination program relies on a care team that includes nurses, pharmacists, and care coordinators to work with patients using specialty drugs to treat hepatitis C, rheumatoid arthritis, multiple sclerosis, hemophilia, infertility, and transplants, among others. This program helps patients achieve improved health outcomes through case management, refill reminders, and side effect management. Quarterly newsletters with information specific to their disease condition are also sent to patients taking specialty medications.

Oncology Clinical Pathways Program Promotes Quality, Cost-Efficient Care

CareFirst’s P4 Pathways Program is an oncology treatment pathway program that is built on clinically proven, evidence-based treatment protocols. The pathways are developed by medical oncologists and reward physicians who use oncology drug treatment regimens that are effective and efficient. CareFirst utilizes this provider-centered approach to support medical decision-making given the unique nature of oncology and inclusion of oncology drugs under the medical rather than pharmacy portion of a patient’s health benefit plan. As a result of the oncology pathway program, CareFirst has been able to lower costs for specialty oncology drugs and put more resources into reimbursing physicians for the cognitive services they provide to their oncology patients.

“A Hand-Shake, Not a Hand-Off”

CareFirst’s specialty pharmacy efforts work in tandem with its Patient Centered Medical Home (PCMH) program. Care coordinators that work directly with patients taking specialty drugs also stay in close contact with the physicians and nurses that coordinate patient care under the PCMH program so there is a seamless infrastructure supporting these patients.

A large part of why CareFirst is able to successfully manage specialty drug utilization is its use of advanced, data-driven analytics. At the time a patient fills a specialty drug prescription, a request goes out to CareFirst’s PBM partner, CVS Health, to enter the patient into its specialty pharmacy coordination program. Data generated from engagement in this program can help keep treating physicians informed regarding their patients’ utilization and outcomes related to specialty medications.

Looking Forward

CareFirst believes in creating a high touch and centralized program for members on specialty medications because they require the support. As the program continues to operate, CareFirst believes the outcome will be a reduction in total cost of care. In particular, CareFirst will be looking for a reduction in ER visits, admissions and readmissions, and increases in medication adherence, among other factors.
Therapy Support at the Condition-Level to Create Customizable, Patient-Centered Solutions

Cigna uses integrated condition-level therapy management to deliver an optimal experience for specialty pharmacy customers. From condition-specific fulfillment teams within Cigna Specialty Pharmacy Services to drug-specific coaching and support, the company coordinates customer outreach across medical, disease management and pharmacy via a single customer engagement platform that brings together all coaches and clinicians.

Each customer requiring specialty medical injectables is provided with unique customized solutions to enhance therapy across various benefit plans. The medical injectable program, called Specialty Care Options, provides cost-effective solutions for customers requiring chronic high-cost medical injectable therapy. Cigna case managers closely work with customers regarding site of care and also help with coordination among health care providers.

Specialty Collaborative Care Program Currently Underway

Building on its experience with collaborative care arrangements with large physicians groups and integrated delivery systems, Cigna has recently implemented a similar model to reward specialty practices in five specialties – orthopedics, obstetrics-gynecology, cardiology, gastroenterology, and oncology – for value rather than volume. This model is based on both quality and cost components and the specialty practices must meet targets for both improved quality and lower medical costs in order to receive a value-based payment.

Fundamental components of the collaborative care relationships are care coordinator nurses embedded in the medical group practices who interact with both the treating physicians and patients to improve care coordination, continuity, and medication adherence, thus further promoting the plan’s 360-degree view of the patient and integration of specialty pharmacy management. Patients receive support from the care coordinators to make certain prescriptions are available and doses are not missed. Patients are also provided educational information about both their condition and their treatments as part of this support. Careful attention is paid to educating patients about their specialty medications. Specialty customers also have access to various coaching programs to improve adherence to medications.

Cigna’s Focus on Oncology Care Today and in the Future

Oncology diagnoses include complex, multi-faceted conditions requiring unique dynamics among health care professionals, customers, and pharmacies. As such, Cigna has formed an enterprise-wide work team comprised of doctors, case managers, pharmacists, and other care support professionals to look at the diverse needs in oncology care today, as well as in the future, as therapies advance and evolve. In understanding how to best manage costs, primary themes have emerged:

• The practice of oncology varies from location to location - i.e., oncology practices differ in managing medication therapy and supply. Working at a local level with oncology practices to reward episodic value over fee for service is important for improving affordability in this area. Oncology pathways are likely to play an important role in these strategies.
• The pipeline for oncology therapies is robust and unique approaches are developing drugs at the patient level to target tumors according to genetic structure. The sophistication around new oncology therapies goes well beyond oral vs. infused, and requires a multidisciplinary approach in working closely with health care professionals while evaluating patient-level clinical factors.
• Access to urgent care is a significant driver of costs. As part of Cigna’s local practice strategy, the company is looking at ways to reward overall value, including managing customers to avoid unneeded emergency room and inpatient visits.

Cigna continues to manage current oncology therapies through a connected approach that includes utilization management and drug list strategies across Pharmacy and...
Medical benefits and clinical coordination among case managers, the Cigna Specialty Pharmacy Oncology team, and Specialty Rx therapy management services. A dedicated team of specially-trained pharmacy professionals works closely with customers and their treating physicians to manage medication changes and refills, as well as prior authorization, and is connected to other Cigna customer care services via one engagement platform.

### Outcomes Based Contracting to Highlight Importance of Adherence

Cigna has one-of-a-kind, outcomes-based inflation-protection agreements that incent for optimal health and cost outcomes. Cigna’s contract with EMD Serono is designed to help people with multiple sclerosis prevent significant relapses. Results are measured in part by the percentage of hospitalization and emergency room visits avoided through the use of EMD Serono’s multiple sclerosis drug, Rebif® (interferon beta-1a). Because each relapse may lead to additional irreversible neurological damage in individuals with relapsing multiple sclerosis, another goal is to help delay the progression of the disease and potential disability through Cigna’s integrated services.

Recently, Cigna entered into a preferencing agreement with Gilead for its hepatitis C medications. The agreement includes development of an outcomes incentive alignment based on actual sustained virologic response (SVR) results across Cigna’s customer population. Customers who have an SVR when tested 12 weeks after the completion of treatment are considered cured. To help address the affordability challenges around the new hepatitis C therapies, Cigna has also made an investment in analyzing “real-world” SVR outcomes with the leading hepatitis C treatments across the genotypes as Cigna believes creating alignment around clinical and financial outcomes drives more affordable access to essential medications. Cigna will leverage these insights within the arrangement with Gilead to drive improved outcomes and support increased affordability across pharmacy and medical benefits.

### Looking Forward

- • Take advantage of integrated data of specialty conditions to inform next generation of clinical, operational and benefit design solutions.
- • Use expanded medical information within the pharmacy benefit to enhance customer services and support cost-effective choices and improved total outcomes.
- • Develop new plan design capabilities to create greater consistency between benefits, enhance use of preferred specialty medications and biosimilars, and support customer choice of health care professionals who achieve quality of care while managing costs effectively.
- • Enhance medical contracting strategies and plan designs that support channel optimization.
- • Develop value-based benefit designs that encourage and reward adherence and participation in customer support programs.
- • Evolve existing therapy management capabilities and create even stronger coordination among Cigna SRx, disease management, case management and disability services.
In-House Specialty Pharmacy Leverages Integration, Focuses on Safety

Kaiser Permanente (KP) established its own specialty pharmacy in 2006 to provide dispensing and clinical services, thus helping KP manage safety and usage issues associated with specific medications. The KP Specialty Pharmacy (KPSP) handles over 20 specialty medications that make up a subset of specialty drugs with high-risk safety profiles for which the FDA requires a Risk Evaluation and Mitigation Strategy (REMS) from manufacturers to ensure that the benefits of these drugs outweigh their risks. KP contributes to this process by collecting and submitting data on the specialty medications to the REMS programs for post-marketing surveillance efforts and by assuring that specified safety measures are taken (e.g., liver function tests, pregnancy testing, safety counseling for patients, and other precautions). The KP Specialty Pharmacy demonstrates how specialty pharmacy operations in integrated systems can result in more affordable quality care for patients receiving specialty pharmaceuticals.

To ensure safe, effective and efficient use of specialty drugs, KP integrates clinical and specialty pharmacy services and Health IT tools. When a clinician prescribes a REMS-designated specialty drug, the pharmacist accesses lab values and clinical notes in the patient’s electronic health record (EHR) and works with the physician to make any needed adjustments. For example, when an oncology drug with the possible side effect neutropenia is prescribed, the pharmacist can access the patient’s white blood cell count and if it is below established norms, can work with the prescribing physician to modify the dosage or consider alternative medications as appropriate. Additional patient education associated with REMS-designated specialty drugs ensures that patients are aware of possible risks associated with these medications. This routine interface with patients allows for early detection of adverse effects and allows for promotion of medication adherence.

Special Tools to Promote Medication Adherence

Case management of patients taking specialty medications occurs both for specialty drugs with REMS and for designated non-REMS specialty drugs. For REMS-designated drugs, the case management is done by the KP Specialty Pharmacy. For other specialty drugs, the case management is done by KPSP or by pharmacists working in local KP pharmacies. Case management includes a thorough evaluation of patients’ clinical conditions plus proactive provider interactions, from exchanging information with treating providers and checking lab values to utilization review and patient counseling on adherence. Use of in-house specialty pharmacy software allows KP pharmacists to customize workflow queues according to specialty drug to ensure consistent delivery of clinical case management services, incorporate system prompts that notify the pharmacist prior to the next refill, document counseling sessions, and conduct call-back reminders.

Given the importance of adherence, KP pharmacists offer tools such as pill boxes, calendar reminders, and smartphone applications to help patients take their medications as directed. KP also has special medication containers that include a recorded message inside the container cap notifying the patient whether or not the container has been opened that day.

Looking Forward

Value will continuously be emphasized going forward. Improvement in outcomes is a therapy goal for which better indicators are constantly being explored, to show whether specialty medications change outcomes in comparison to existing alternatives or whether they lower overall medical costs by reducing or eliminating emergency room visits or hospitalizations. Internally, tools are being refined to evaluate efficacy, safety, and cost-effectiveness. This will help KP to deliver optimum value with high-cost specialty pharmaceuticals used in the integrated health care delivery system.